			45 11	, , ,	B				
	Connecticut De	epartment o	of Public H	lealth	Drinkin	g Wate	r Se	ection	
	Water Q	uality Moni	itoring and	d Com	pliance	Schedu	le		
PWS ID	PWS Name	-			Classification	Population	n Ow	vner Type P	rimary Source
CT0400024	95 SPOONVILLE ROAD -	EAST GRANBY			NC	29		Р	GW
Local Addr	ess (where applicable)		Service	Residen	tial Commerc	cial Indust	rial	Combined	Agricultural
			Connections		2				
Towns Serv	ved: EAST GRANBY								
		Moni	toring Requ	ireme	nts				
Water Sys	stem Facility: DISTRIBUTIO	ON SYSTEM (WSF	ID: 00600)						
	iform (3100)						1 ro		per quarter
	ling Point (Sampling Point ID)					Collection P	erioa		iance Status
Select	from Inventory of Active Sam	pling Points			12/31/18				mplete
				1/1/19 -				Co	mplete
				4/1/19 -					
				7/1/19 -	9/30/19				
-	Parameters (PPS)					Collection P		= =	per quarter
-	ling Point (Sampling Point ID)					iance Status			
Select	from Inventory of Active Sam			12/31/18	Complete Complete				
			1/1/19 -				Co	mpiete	
				4/1/19 -					
Mator Cus	stom Facility FNTDY DOIN	T (MCF ID: 00700	2)	7/1/19 -	9/30/19				
•	stem Facility: ENTRY POIN	1 (WSF ID: 00700	(ע				1	ti	
Nitrate (1040) ling Point (Sampling Point ID)			Monitori	na Dariad	Collection P			per quarter
						Conection P	erioa		iance Status
ENIK	Y POINT (3)		·	1/1/19 -	12/31/18				omplete omplete
				4/1/19 -				Cl	mpiete
				7/1/19 -					
Nitrite (1	10/11			7/1/13	J/ 30/ 13		1	routine (RT) per year
	ling Point (Sampling Point ID)			Monitori	ng Period	Collection P		. · . · .	iance Status
	Y POINT (3)				12/31/18	Concettion	Ciiou	•	mplete
LIVIII	110111 (3)				12/31/19				mplete
					12/31/20				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Public No	tification R						
			Compliance	Notice	<u>Public I</u>	<u>Votification</u>		<u>PN Cer</u>	<u>tification</u>
Violation/S			Period	Tier	Required			Due to DPH	Received
Nitrate M8	R Violation	10/	1/10 - 12/31/10	2	4/16/2013	1		4/26/2011	
	Wate	er System Faci	ility and Sar	npling	Point Inve	entory			
Water					1	Total Lead	d and	1	
-	Water System Facility		t Sampling Poi	nt		-	pper		Stage
Facility ID		ID	Description		Jiulus		e Tie	r Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			Υ			
		DOWNSTREAM	M WITHIN 5 SER	VICE CON	N A				

ENTRY POINT

WELL

WITHIN 5 SERVICE CON

Α

Α

Α

UPSTREAM

3

2

ENTRY POINT

BLADDER TANK

WELL

00700

20719

56237

	Water Quality Monitoring and Compliance Schedule													
PWS ID	PWS Name		Cla	ssification	Population	Owner Type	Primary Source							
СТ0400024	95 SPOONVILLE ROAD - EAST GRANBY				NC	29	Р	GW						
Local Address	(where applicable)	Residen	ntial	Commerci	al Industri	al Combin	ed Agricultural							
			2											

Connecticut Department of Public Health Drinking Water Section

Towns Served: EAST GRANBY

				Contact Inf	ormation					
Name				Organization	1		Job Title			
Mr. George F. Casti	О			C/O Liquor C	Cabinet		Owner			
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code	
54 Rainbow Road						East Gra	inby	СТ	06026	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress			
860-644-6088		860-653-	3141							
Contact Role(s): A	dministrative	Contact, Leg	al Contact	, Owner						
Name				Organization	1			Job Title		
Ms. Maria P. Castro)			95 Spoonvill	e Road					
Mailing Address Lin	e One		Mailing A	ddress Line Two			City	State	Zip Code	
65 Collins Crossing						South W	/indsor	СТ	06074	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress			
860-644-6088										
Contact Role(s): O	wner		,		•					

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section												
	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source								
CT0400034	20 COPPER HILL ROAD NC 25 P GW												

Connections

Residential Commercial

1

Industrial

Combined

Agricultural

Service

Towns Served: EAST GRANBY

Local Address (where applicable)

TOWIS Served. LAST GRANDT									
M	Ionitoring Req	uirement	ts						
Water System Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)								
Total Coliform (3100)				1 r	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monitoring	Period C	ollection Perio	od Complia	ınce Status			
Select from Inventory of Active Sampling Points		4/1/19 - 6/30/19 Comple							
		7/1/19 - 9/30/19							
Physical Parameters (PPS)				1 r	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monitoring	od Complia	ınce Status					
Select from Inventory of Active Sampling Points		4/1/19 - 6,	/30/19		Cor	nplete			
		7/1/19 - 9,	/30/19						
Water System Facility: ENTRY POINT (WSF ID: 0	00700)								
Nitrate (1040)				1 r	outine (RT) p	er quarter			
Sampling Point (Sampling Point ID)		Monitoring	Period C	ollection Perio	od Complia	ınce Status			
ENTRY POINT (3)		4/1/19 - 6,	/30/19		Cor	nplete			
		7/1/19 - 9,	/30/19						
Nitrate And Nitrite (NOX)					1 routine (R	Γ) per year			
Sampling Point (Sampling Point ID)		Monitoring	Period C	ollection Perio	od Complia	ınce Status			
ENTRY POINT (3)		1/1/18 - 12	2/31/18		Cor	nplete			
		1/1/19 - 12	2/31/19		Cor	nplete			
		1/1/20 - 12	2/31/20						
Publi	c Notification I	Requiren	nents						
	Compliance	Notice	Public No	<u>otification</u>	PN Certi	fication			
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received			
REVISED TOTAL COLIFORM RULE (RTCR)	4/2/17 - 4/13/18	3	10/13/2018		10/23/2018				

	Water System Facility and Sampling Point Inventory													
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos		Stage 2 DBPR					
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ									
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α										
		UPSTREAM	WITHIN 5 SERVICE CON	Α										
00700	ENTRY POINT	3	ENTRY POINT	Α										
20720	WELL	2	WELL	Α										
56362	BLADDER TANK													
56364	ION EXCHANGE													

	Contact Information													
Name				Organization			Job Title							
Mr. Paul Banks		20 Copper Hil	l Road, LLC	Owner										
Mailing Address Line	e One		Mailing Addr	ress Line Two			City	State	Zip Code					
80 Wheeler Drive						West Su	ffield	СТ	06093					
Business Phone Extension Fax				bile Phone	Emergency Phone	Email Address								

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section												
	Wa	ter Qua	lity Moi	nito	ring a	nd Con	nplia	nce S	Schedul	e			
PWS ID	PWS Name						Classif	ication	Population	Owner Type	pe Primary Sou		
CT0400034	20 COPPER HILL	ROAD					N	С	25	Р		GW	
Local Address (w	here applicable)			9	Service	Residen	itial Co	mmerci	al Industri	al Combin	ed	Agricultural	
			(Connections			1						
Towns Served: E	AST GRANBY												
860-653-2123								pbanks	@copperhil	lgolf.com			
Contact Role(s):	Administrative	Contact, Leg	al Contact,	Owne	r								
Name				Org	anization					Job Tit	le		
20 Copper Hill Ro	oad LLC												
Mailing Address	Line One		Mailing Add	dress L	Line Two				City	State		Zip Code	
20 Copper Hill Ro	I							East Gr	ranby	СТ		06026	
Business Phone	Extension	Fax	N	1obile	Phone	Emergency	/ Phone	Email A	Address	·			
Contact Role(s)	Owner	1	"		1			1					

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut D	epartment o	f Public H	lealth	Dr	inkii	ng V	Vater	Se	ction	
	Water C	uality Moni	toring and	d Com	ıpli	iance	e Sc	hedul	le		
PWS ID	PWS Name	<u> </u>	<u> </u>							ner Type	Primary Source
СТ0400104	HARTFORD GUN CLUB	- MAIN CLUB HOUSE				NC		25		Р	GW
Local Addre	ess (where applicable)		Service	Residen	tial	Comme	rcial	Industr	ial	Combine	d Agricultur
	I MAIN STREET		Connections			1					
Towns Serv	ved: EAST GRANBY						_				
		Monit	oring Requ	iireme	nts						
Water Sys	tem Facility: DISTRIBUTIO	ON SYSTEM (WSF	ID: 00600)								
	iform (3100)							1	l rou	itine (RT)	per quarte
_	ling Point (Sampling Point ID)		ı	Monitori	ng Pe	eriod	Colle	ection Pe	riod	Comp	liance Status
Select	from Inventory of Active Sam	pling Points		10/1/18 -							omplete
				1/1/19 -		-				C	omplete
				4/1/19 -							
Dh	Dawa (DDC)			7/1/19 -	9/30)/19			1	(DT)	
-	Parameters (PPS) ling Point (Sampling Point ID	1		Monitori	na Da	oriod	Colle	ction Pe			per quarte
	from Inventory of Active Sam			Monitoring Period 0 10/1/18 - 12/31/18					Tiou		omplete
Sciecc	THOM INVENTED Y OF ACTIVE Sun	ipinig i onits		1/1/19 -							omplete
				4/1/19 -							
				7/1/19 -							
Water Sys	tem Facility: ENTRY POIN	IT (WSF ID: 00700)			<u>-</u>					
Nitrate A	nd Nitrite (NOX)								1	routine (RT) per yea
Sampl	ling Point (Sampling Point ID))		Monitori	ng Pe	eriod	Colle	ection Pe	riod	Comp	liance Status
ENTR	POINT (3)			1/1/18 -	12/3	1/18				C	omplete
				1/1/19 -		-				C	omplete
				1/1/20 -	12/3	1/20					
		Other O	Compliance	Sched	ule	S					
Compliance	e Schedule Activity			L	Due L	Date		Achie	eved	Date	
RESPOND T	TO SANITARY SURVEY			13	1/18/	/2018					
	Wate	er System Facil	lity and Sar	npling	Poi	nt Inv	vent	ory			
Water							Tota	l Lead	and		
•	Water System Facility		Sampling Poil	nt		(Colifor				Stage
Facility ID		ID .	Description			tatus	Rule	e Rule	Tier	Asbesto:	WQP 2 DBF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			A	Υ				
			1 WITHIN 5 SER			A					
00700	ENTRY DOINT	UPSTREAM	WITHIN 5 SER		N	A					
	ENTRY POINT	3	ENTRY POINT			Α					
20726	CLUB HOUSE WELL	2	WELL #1	- •		A					
			ntact Inforr	nation							
Name			Organization							Job Title	
Mr. Mike G	Ganis	H	lartford Gun Clu	ıb			ſ	Manager			

Mailing Address Line Two

Mobile Phone

Mailing Address Line One

Extension

Fax

157 South Main Street

Business Phone

860-658-1614

Zip Code

06026

State

CT

City

hgc1884@gmail.com

East Granby

Emergency Phone Email Address

860-670-5822

Connecticut Department of Public Health Drinking Water Section													
	Wate	er Qua	lity Moni	toring a	nd Con	nplia	nce S	Schedul	le				
PWS ID P	WS Name					Classifi	ication	Population	Owner Type	Primary So	urce		
CT0400104 H	ARTFORD GUN	CLUB - MAI	N CLUB HOUSI			N	С	25	Р	GW			
Local Address (wh	ere applicable)			Service Resider		ntial Co	mmercia	al Industri	al Combine	ed Agricul	tural		
57 SOUTH MAIN STREET				Connection	ns		1						
Towns Served: EA	ST GRANBY							,					
Name			(Organization					Job Titl	e			
Mr. Greg Maglier	į		ŀ	Hartford Gun			President						
Mailing Address L	ine One		Mailing Addre	ss Line Two				City	State	Zip Cod	е		
157 South Main S	treet						East Gr	anby	СТ	06026			
Business Phone	Business Phone Extension Fax N				Emergenc	y Phone	e Email Address						
860-658-1614							hgc188	34@gmail.co	om				
Contact Role(s):	Legal Contact		,	"									

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

			in the realization	D 1 1			
Co	•		Public Health				ction
	Water Qu	ality Monit	oring and Com	ipliand	ce Sche	dule	
PWS ID PW	'S Name			Classificat	ion Popul	ation Own	er Type Primary Source
CT0400124 OLI	D NEWGATE PRISON &	COPPER MINE		NC	50	0	P GW
Local Address (wher	e applicable)		Service Residen	tial Comn	nercial In	dustrial	Combined Agricultural
115 NEWGATE ROAI	D		Connections	:	1		
Towns Served: EAST	GRANBY						
		Monito	oring Requireme	nts			
Water System Fac	ility: DISTRIBUTION	SYSTEM (WSF I	D: 00600)				
Total Coliform (3	100)					1 rou	tine (RT) per quarter
Sampling Point	t (Sampling Point ID)		Monitori	ng Period	Collection	on Period	Compliance Status
Select from Inv	entory of Active Sampli	ng Points	4/1/19 -	6/30/19			
			7/1/19 -	9/30/19			
Physical Paramet							tine (RT) per quarter
	t (Sampling Point ID)		Monitori	_	Collection	on Period	Compliance Status
Select from Inv	entory of Active Sampli	ng Points	10/1/18 -				Complete
			4/1/19 -				
			7/1/19 -	9/30/19			
Water System Fac	ility: ENTRY POINT	(WSF ID: 00700)					
Nitrate And Nitrit	te (NOX)					1 ו	outine (RT) per year
Sampling Point	t (Sampling Point ID)		Monitori	ng Period	Collecti	on Period	Compliance Status
ENTRY POINT (3)		1/1/18 -	12/31/18			Complete
			1/1/19 -	12/31/19			
			1/1/20 -	12/31/20			
Water System Fac	ility: WELL (WSF ID	: 20728)					
E. Coli (3014)						1 trigg	ered (TG) per period
Sampling Point	t (Sampling Point ID)		Monitori	ng Period	Collecti	on Period	Compliance Status
WELL (2)			10/22/18	- 10/28/18			Complete
		Other Co	ompliance Sched	ules			
Compliance Schedu	le Activity		L	Due Date		Achieved L	Date
SEASONAL START UI	COMPLETION		Į.	5/9/2019			
CROSS CONNECTION	N SURVEY REPORT		•	3/1/2020			
	Water	System Facili	ty and Sampling	Point I	nventor	у	
Water					Total	Lead and	
	stem Facility		Sampling Point		Coliform	Copper	Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos WQP 2 DBPR
00600 DISTRIBU	TION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ		
		DOWNSTREAM	WITHIN 5 SERVICE CON	1 A			
		ONP1	WOMENS SINK 1	Α	Υ		
		ONP2	WOMENS SINK 2	Α	Υ		
		ONP3	WOMENS SINK 3	Α	Υ		
		ONP4	MEN'S SINK 1	Α	Υ		
		ONP5	MEN'S SINK 2	Α	Υ		
		ONP6	MEN'S SINK 3	Α	Υ		
		ONP7	HANDI SINK	Α	Υ		

OUTSIDE SPICKET

WITHIN 5 SERVICE CON

MENS #2

Υ

Υ

Α

Α

Α

ONP8

ONPS

UPSTREAM

	domine the department of I abite Health Dimming Water bection												
	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name		Cla	ssification	Population	Owner Type	Prir	mary Source					
CT0400124	OLD NEWGATE PRISON & COPPER MINE				NC 50		Р		GW				
Local Address	ocal Address (where applicable) Service Re					al Industri	al Combin	ed	Agricultural				
115 NEWGATE	ROAD	Connections			1								

Connecticut Department of Public Health Drinking Water Section

TOWITS SCI	vca. LASI	GIVAINDI										
			Water Sy	stem Fa	cility an	d Samp	ling Poir	nt Inv	entor	у		
Water System Facility ID	_	vstem Facility	S	Sampling Po ID 3	int Sampli Descrip	otion	St	Со	Total liform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPI
20728	WELL			2	WELL			Α				
				С	ontact I	nforma	tion					
Name					Organizat	ion					Job Title	
Ms. Elizab	eth Shapi	ro			State Hist	oric Presei	rvation		Dire	ector Opera	ations	
Mailing Ad	ldress Lin	e One		Mailing Add	ress Line Tv	VO			Ci	ty	State	Zip Code
450 Colum	bus Blvd			Suite 5				Hartfo	ord		СТ	06103
Business	Phone	Extension	Fax	M	obile Phon	e Emer	gency Phon	e Email	Addres	SS		
860-655	5-1591					989	9-640-2150	morg	an.ben	gal@ct.gov		
Contact Ro	ole(s): Ac	dministrative	Contact									
Name					Organizat	ion					Job Title	
Ms. Morga	an Bengel											
Mailing Ad	ldress Lin	e One		Mailing Add	ress Line T	VO			Ci	ty	State	Zip Code
450 Colum	bus Ave							Hartfo	ord		СТ	06103
Business	Phone	Extension	Fax	M	obile Phon	e Emer	gency Phon	e Email	Addres	SS		
860-655	5-1591					989	9-640-2150	morg	an.ben	gel@ct.gov		
Contact Ro	ole(s): Le	gal Contact										

Please note the following:

Towns Served: EAST GRANBY

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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End of schedule

Schedule Generation Date: 4/11/2019

Connecticut Department of Public Health Driv	nlrina	TAInter	a Ca	ation			
*	_			cuon			
Water Quality Monitoring and Complia PWS ID PWS Name Classic			_	or Type F	Primary Source		
	NC	25	OWII	P P	GW		
	Commerci		rial (Combined			
60 SOUTH MAIN STREET Connections		1			7.8		
Towns Served: EAST GRANBY							
Monitoring Requirements							
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)							
Total Coliform (3100)		:	1 rout	ine (RT)	per quarter		
Sampling Point (Sampling Point ID) Monitoring Per	riod C	ollection Pe			iance Status		
Select from Inventory of Active Sampling Points 10/1/18 - 12/31	1/18			Co	omplete		
1/1/19 - 3/31/:	/19			Co	omplete		
4/1/19 - 6/30/2	/19						
7/1/19 - 9/30/2	/19						
Physical Parameters (PPS)		:	1 rout	ine (RT)	per quarter		
	Monitoring Period Co			Collection Period Complia			
	10/1/18 - 12/31/18				omplete		
1/1/19 - 3/31/				Co	omplete		
4/1/19 - 6/30/							
7/1/19 - 9/30/2	/19						
Water System Facility: ENTRY POINT (WSF ID: 00700)			4		n=\		
Nitrate And Nitrite (NOX)	wind C	allostion De		-	RT) per year		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) Monitoring Per		ollection Pe		Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) Monitoring Period 1/1/18 - 12/31/	/18	ollection Pe		Compl			
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/	/18 /19	ollection Pe		Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/	/18 /19 /20	ollection Pe		Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules	/18 /19 /20		eriod	Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity Due Do	/18 /19 /20			Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Monitoring Period 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules 3/1/20	/18 /19 /20 i ate	Achi	eriod	Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point	/18 /19 /20 6 ate 022 nt Inve	Achie ntory	eriod	Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Monitoring Period 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules 3/1/20	/18 /19 /20 6 ate 022 nt Inve	Achientory	eriod	Compl	iance Status		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point Sampling Point	/18 /19 /20 6 ate 022 nt Inve	Achie ntory otal Lead	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Facility ID Nonitoring Period 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Other Compliance Schedules Other Compliance Schedules Schedules Other Compliance Schedules Other Complia	/18 /19 /20 6 ate 022 nt Inve	Achie ntory otal Lead	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity Due Do CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point Water System Water System Facility Facility ID Description State One of the Compliance Schedules Sampling Point Sampling Point Sampling Point Sampling Point State One of the Compliance Schedules Schedules One of the Compliance Schedules One of the Compliance Schedules Schedules	/18 /19 ./20 6 ate 022 nt Inve Coli	Achientory otal Lead iform Cop	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity Due Do CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point Water System Water System Facility Sampling Point Sampling Point Facility ID Description State One Of Distribution system 3 Generated by Batch 4 Distribution system	/18 /19 /20 Solution of the control of the contr	Achie ntory otal Lead iform Cop Rule Rule	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Sampling Point Sampling Point Facility ID Description State O0600 DISTRIBUTION SYSTEM A DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON	/18 /19 /20 Soute D22 Int Inve Colinatus R A	Achie ntory otal Lead iform Cop Rule Rule	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity Due Do CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Facility ID O0600 DISTRIBUTION SYSTEM 3 GENERATED BY BATCH 4 DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON	/18 /19 /20 sate 022 nt Inve Coli tatus R A A	Achie ntory otal Lead iform Cop Rule Rule	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Facility ID O0600 DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON O0700 ENTRY POINT Monitoring Per State Due Do State Sampling Point Sampling Point Description State O0600 DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON O0700 ENTRY POINT	/18 /19 /20 Sate 022 nt Inve Coli tatus R A A	Achie ntory otal Lead iform Cop Rule Rule	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Facility ID O6000 DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON O0700 ENTRY POINT A DISTRIBUTION SYSTEM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON	/18 /19 /20 sate 022 nt Inve Coli tatus R A A A	Achie ntory otal Lead iform Cop Rule Rule	eriod Eeved E d and oper	Compl Co	iance Status complete Stage		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/19 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity Due Do CROSS CONNECTION EXEMPTION 3/1/20 Water System Facility and Sampling Point Water System Water System Facility Sampling Point Facility ID Description Stampling Point A DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON O0700 ENTRY POINT 10956 SALES WELL 2 SALES WELL	/18 /19 /20 sate 022 nt Inve Coli tatus R A A A	Achie ntory otal Lead iform Cop Rule Rule	eriod d and oper e Tier	Compl Co	iance Status complete		
Nitrate And Nitrite (NOX) Sampling Point (Sampling Point ID) ENTRY POINT (3) 1/1/18 - 12/31/ 1/1/20 - 12/31/ Other Compliance Schedules Compliance Schedule Activity CROSS CONNECTION EXEMPTION Water System Facility and Sampling Point System Water System Facility Facility ID Description Steel O0600 DISTRIBUTION SYSTEM DOWNSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON UPSTREAM WITHIN 5 SERVICE CON O0700 ENTRY POINT 10956 SALES WELL Contact Information	/18 /19 /20 sate 022 nt Inve Coli tatus R A A A	Achie ntory otal Lead iform Cop Rule Rule	eriod d and oper e Tier	Compl	iance Status complete Stage		

Mobile Phone

 CT

East Granby

Emergency Phone Email Address

06026

P O Box 1776

Fax

60 South Main Street

Extension

Business Phone

860-653-2524 Contact Role(s): **Owner**

	Connectic	ut Depa	rtment of	Public I	Health I	Drin	king V	Water S	ection	
	Wa	ter Qua	lity Monito	oring an	nd Com	plia	nce Sc	hedule		
PWS ID	PWS Name								wner Type P	rimary Source
CT0400143	GALASSO MATE	RIALS, LLC-S	ALES WELL			N	С	25	Р	GW
Local Address (w	here applicable)			Service	Residentia	al Co	mmercial	Industrial	Combined	Agricultural
60 SOUTH MAIN	STREET			Connections	S			1		
Towns Served: EA	AST GRANBY				"	_				
Name			Or	ganization					Job Title	
Mr. Leigh Turner			Ga	lasso Materia	ials			Safety Mana	ager	
Mailing Address Line One Mailing Addre			Mailing Address	ss Line Two			City		State	Zip Code
60 South Main St	reet						East Gran	nby	СТ	06026
Business Phone	Extension	Fax	Mobil	oile Phone Emergency Phone Emai			Email Address			
860-653-2524	3222						LTurnerj	@galassoma	aterials.com	
Contact Role(s):	Administrative	Contact								
Name			Or	ganization					Job Title	
Mr. Craig Timpso	on									
Mailing Address I	Line One		Mailing Address	Line Two				City	State	Zip Code
60 South Main St	60 South Main St						East Gran	nby	СТ	06026
Business Phone	Extension	Fax	Mobil	e Phone E	Emergency P	hone	Email Ad	dress		
860-653-2524	3202									
Contact Role(s):	Legal Contact									

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Do	epartment of	Public Hea	ilth [)rinki	ng W	ater Se	ction	
	Water C	uality Monit	oring and (lomr	olianc	e Sch	edule		
PWS ID	PWS Name		8					ner Type Pi	rimary Source
CT0400153	GALASSO MATERIALS, I	LLC-GARAGE WELL			NC		25	P	GW
Local Addr	ress (where applicable)		Service Re	sidentia	I Comm	ercial Ir	ndustrial	Combined	Agricultural
	MAIN STREET		Connections				1		
Towns Ser	ved: EAST GRANBY					-			
		Monito	oring Require	ment	ts				
Water Sys	stem Facility: DISTRIBUTIO	ON SYSTEM (WSF II	D: 00600)						
Total Col	iform (3100)						1 rou	ر (RT) tine	per quarter
Samp	ling Point (Sampling Point ID))	Mo	nitoring	Period	Collect	ion Period	Compli	ance Status
Select	t from Inventory of Active Sam	10/2	L/18 - 12	2/31/18			Co	mplete	
			1/2	L/19 - 3,	/31/19			Co	mplete
			4/2	L/19 - 6,	/30/19				
7/1/19 - 9/30/19									
Lead And	Copper (PBCU)						5 routine	(RT) per t	three years
Samp	ling Point (Sampling Point ID)	Mo	nitoring	Period	Collect	ion Period	Compli	ance Status	
Select	t from Inventory of Active Sam	1/1	/16 - 12	/31/16	6/:	1-9/30	Co	mplete	
Physical	Parameters (PPS)						1 rou	ر (RT) tine	per quarter
Samp	ling Point (Sampling Point ID))	Mo	nitoring	Period	Collect	ion Period	Compli	ance Status
Select	t from Inventory of Active Sam	pling Points	10/2	L/18 - 12	2/31/18			Co	mplete
			1/2	L/19 - 3,	/31/19			Co	mplete
			4/2	L/19 - 6,	/30/19				
			7/:	L/19 - 9,	/30/19				
Water Sys	stem Facility: ENTRY POIN	IT (WSF ID: 00700)							
Nitrate A	and Nitrite (NOX)						1	routine (R	T) per year
Samp	ling Point (Sampling Point ID))	Mo	nitoring	Period	Collect	ion Period	Compli	ance Status
ENTR	Y POINT (3)		1/1	/18 - 12	/31/18			Co	mplete
			1/1	/19 - 12	/31/19				
			1/1	/20 - 12	/31/20				
		Other Co	ompliance So	hedu	les				
Compliand	e Schedule Activity			Du	e Date		Achieved	Date	
CROSS COI	NNECTION EXEMPTION			3/:	1/2022				
	Wate	er System Facili	ty and Samp	ling P	oint Ir	vento	ry		
Water						Total	Lead and		
System	Water System Facility	Sampling Point				Coliform	Copper		Stage
Facility ID		ID	Description		Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SY		Α	Υ			
			WITHIN 5 SERVIC		Α				
		UPSTREAM	WITHIN 5 SERVIC	E CON	Α				
00700	ENTRY POINT	3	ENTRY POINT		Α				
10957	GARAGE WELL	2	GARAGE WELL		Α				
		Con	tact Informa	tion					
Namo		0.	ganization					Job Titlo	

Job Title

State

 CT

Zip Code

06026

City

East Granby

Emergency Phone Email Address

Organization

Mobile Phone

Mailing Address Line Two

P O Box 1776

Fax

Name

Galasso Materials, LLC
Mailing Address Line One

60 South Main Street

Extension

Business Phone

	Connectic	ut Depa	rtme	ent of	Public	Health	Drin	nking	Water	Sec	tion	
	Wa	ter Qua	lity N	Ionit	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID	PWS Name						Classif	ication	Population	Owne	r Type [Primary Source
CT0400153	GALASSO MATE	RIALS, LLC-G	ARAGE	WELL	<u>-</u>		N	С	25		Р	GW
Local Address (w	nere applicable)				Service Resid		ntial Co	mmerci	al Industri	al C	ombined	d Agricultural
60 SOUTH MAIN) SOUTH MAIN STREET				Connection	ns			1			
Towns Served: EA	AST GRANBY						1		"			
860-653-2524	860-653-2524											
Contact Role(s):	Owner											
Name				Oı	Organization					J	lob Title	
Mr. Leigh Turner				Ga	Galasso Materials			Safety Man		anager		
Mailing Address I	ine One		Mailing	Addres	s Line Two			City			State	Zip Code
60 South Main St	reet							East G	ranby		CT	06026
Business Phone	Extension	Fax		Mobile Phone Emergency Phone Email Address								
860-653-2524	3222							LTurne	rjr@galasso	materi	ials.com	
Contact Role(s):	Administrative	Contact, Leg	al Cont	act	,			•				

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Departmen	nt of Public H	ealth	Dr	rinking	g Water	Section	
	Water Quality Monitoring and Compliance Schedule							
PWS ID	PWS Name			Clas	ssification	Population	Owner Type	Primary Source
CT0408024	O408024 EAST GRANBY FARMS				NC	27	L	GW
Local Address	(where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural
79 NORTH MA	IN STREET	Connections			3			
Towns Served:	EAST GRANBY			·		'		
Monitoring Requirements								
Water Syster	n Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)						

79 NORTH MAIN STREET		Connection	S	3				
Towns Served: EAST GRANBY								
	М	onitoring Req	uirement	ts				
Water System Facility: DISTRIBUTION	SYSTEM (WSF ID: 00600)						
Total Coliform (3100)						1 rc	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)			Monitoring	Period	Collection	n Perio	d Complic	ance Status
Select from Inventory of Active Sampli	ng Points		4/1/19 - 6,	/30/19				
			7/1/19 - 9,	/30/19				
Physical Parameters (PPS)						1 rc	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)			Monitoring	Period	Collection	n Perio	d Complic	ance Status
Select from Inventory of Active Samplin	ng Points		4/1/19 - 6,	/30/19				
			7/1/19 - 9,	/30/19				
Water System Facility: ENTRY POINT	(WSF ID: 0	0700)						
Nitrate (1040)						1 rc	outine (RT) p	er quarter
Sampling Point (Sampling Point ID)			Monitoring	Period	Collection	n Perio	d Complic	ance Status
ENTRY POINT (3)			4/1/19 - 6,	/30/19				
			7/1/19 - 9,	/30/19				
Nitrite (1041)							1 routine (R	T) per year
Sampling Point (Sampling Point ID)			Monitoring	Period	Collection	n Perio	d Complic	ance Status
ENTRY POINT (3)			1/1/18 - 12				Cor	mplete
			1/1/19 - 12	· · ·				
			1/1/20 - 12	• •				
	Public	Notification	Requiren	nents				
		Compliance	Notice	Public	Notificati	<u>on</u>	PN Certi	<u>ification</u>
Violation/Situation		Period	Tier	Require		rmed	Due to DPH	Received
Nitrate M&R Violation		4/1/16 - 6/30/16	5 2	10/27/20	16		11/6/2016	
Water	System I	Facility and Sa	ampling P	oint Inv	entory	,		
Water					Total L	ead an	d	
System Water System Facility		Point Sampling P		C	-	Coppe		Stage
Facility ID	ID	Description		Status	Rule I	Rule Tie	er Asbestos	WQP 2 DBPR
00600 DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α				
		REAM WITHIN 5 SI		Α				
	UPSTRE	AM WITHIN 5 S	ERVICE CON	Α				
00700 ENTRY POINT	3	ENTRY POIN	JT	Α				
E20C4 WELL 4	-	\A/ELL 4						

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
52861	WELL 1	2	WELL 1	Α				
52865	PRESSURE TANK							

				Contact Inf	ormation				
Name				Organization	1	Job Title			
Mr. David Wing				Town of East	t Granby	Maint Supervisor			
Mailing Address Line One Mailing Addr			dress Line Two			City	State	Zip Code	
9 Center Street			P.O. Box 18	358		East Gra	ınby	СТ	06026
Business Phone	Extension	Fax	N	Nobile Phone	Emergency Phone	Email Address			
860-653-6134		860-653-4	017		860-508-8935	davew@	egtownhall	.com	

Connecticut Department of Public Health	Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	e	
PWS Name	Classification	Population	Owner Type	Primar

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0408024	EAST GRANBY FARMS			NC	27	L	GW
Local Address (v	vhere applicable)	Service	Residen	itial Commerc	cial Industr	ial Combin	ed Agricultural
79 NORTH MAIN	I STREET	Connections		3			

Towns Served: EAST GRANBY

Contact Role(s): Administrative Contact, Legal Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Class	sification	Population	Owner Type	Primary Source
CT0408034	BRIGNOLE VINEYARDS, LLC				NC	35	Р	GW
Local Address (where applicable)		Service	Residen	ntial Commerc		al Industri	al Combine	ed Agricultural
, , ,		Connections			1			

Towns Served: EAST GRANBY

Towns Served: EAST GRANBY			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID:	00600)		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
DISTRIBUTION SYSTEM (4)	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate (1040)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Nitrite (1041)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

			<u> </u>			1			
PWS ID	PWS Name					Classificatio	Population	Owner Type	Primary Source
CT0408034	BRIGNOLE VINEYARD	S, LLC				NC	35	Р	GW
Local Address (where applicable)		Service	Residen	tial Comme	cial Industi	ial Combin	ed Agricultural		
103 HARTFORD	AVE			Connections		1			

Towns Served: EAST GRANBY

Public Notification Requirements								
	Compliance Notice <u>Public Notification</u> <u>PN Certification</u>							
Violation/Situation	Period	Tier	Required	Performed	Due to DPH	Received		
Physical Parameters M&R Violation	10/1/16 - 12/31/16	3	4/13/2018		4/23/2018			
Total Coliform M&R Violation	10/1/16 - 12/31/16	3	4/13/2018		4/23/2018			

	Wa	ater System Facili	ity and Sampling F	Point Ir	nventoi	ry		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
60189	WELL #1	2	WELL #1	Α				
60191	DRESSLIRE STORAGE							

			C	ontact Inf	ormation					
Name				Organization	Organization			Job Title		
Ms. Ariel Sheelan		Brignole Vineyards, LLC			Manager					
Mailing Address Lin	e One	ress Line Two	ess Line Two			State	Zip Code			
103 Hartford Ave.						East Gra	nby	СТ	06026	
Business Phone	Extension	Fax	Mobile Phone Emergency		Emergency Phone	Email Address				
860				0-202-4314 brignole			levineyardsllc@gmail.com			
Contact Role(s): A	dministrative	Contact								
Name				Organization	า			Job Title		
Mr. Timothy Brigno	ole			Brignole Vin	eyards, LLC		Owner			
Mailing Address Line One Mailing Add				ress Line Two			City		Zip Code	
117 Peak Mountain Drive						East Gra	nby	СТ	06026	
Business Phone	Extension	Fax	М	obile Phone	Emergency Phone	Email Ad	ddress	·		
860-202-0540				brignole	vineyardsllc@	gmail.com				

Contact Role(s): Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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End of schedule